

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2007 8:00 am
Secretary of State

02-05-2007 90091 036 ****61.25

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DOCUMENT # 768451					
1. Entity Name HIDDEN HARBOR COMMUNITY ASSOCIATION, INC.					
Principal Place of Business 3361 W. VINE STREET SUITE 208 KISSIMMEE, FL 34741 US			Mailing Address 3361 W. VINE STREET SUITE 208 KISSIMMEE, FL 34741 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-2742529	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
FLORIDA ASSOCIATION MANAGEMENT, INC. 3361 W. VINE STREET, STE. 208 KISSIMMEE, FL 34741			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <i>Dollie Boyd</i>		LCAM <i>Dollie Boyd</i>		DATE <i>1/19/07</i>	
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P	<input checked="" type="checkbox"/> Delete	TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMITH, ALLEN		NAME	Crowell, Penny	
STREET ADDRESS	2306 INDIAN MUND TRAIL		STREET ADDRESS	1350 Hidden Harbor Lane	
CITY-ST-ZIP	KISSIMMEE, FL 34746		CITY-ST-ZIP	Kissimmee FL 34746	
TITLE	VP	<input type="checkbox"/> Delete	TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CROWELL, PENNY		NAME	Barton Roger	
STREET ADDRESS	1350 HIDDEN HARBOR LANE		STREET ADDRESS	1095 Hidden Harbor Lane	
CITY-ST-ZIP	KISSIMMEE, FL 34746		CITY-ST-ZIP	Kissimmee FL 34746	
TITLE	D	<input type="checkbox"/> Delete	TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BARTON, ROGER		NAME	Brandt, Sue	
STREET ADDRESS	HIDDEN HARBOR LANE		STREET ADDRESS	2331 Indian Mound Trail	
CITY-ST-ZIP	KISSIMMEE, FL 34746		CITY-ST-ZIP	Kissimmee FL 34746	
TITLE	T	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KIM, DOUG		NAME	Rogers, Waddy	
STREET ADDRESS	2302 INDIAN MOUND TRAIL		STREET ADDRESS	2291 Main Sail Cove	
CITY-ST-ZIP	KISSIMMEE, FL 34746		CITY-ST-ZIP	Kissimmee FL 34746	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CONDON, EAMON		NAME	Brandt, Malcolm	
STREET ADDRESS	2343		STREET ADDRESS	2331 Indian Mound Trail	
CITY-ST-ZIP	KISSIMMEE, FL 34746		CITY-ST-ZIP	Kissimmee FL 34746	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PATTERSON, SAM		NAME	Hopcroft, Dave	
STREET ADDRESS	2335 INDIAN MOUND TRAIL		STREET ADDRESS	1093 Hidden Harbor Lane	
CITY-ST-ZIP	KISSIMMEE, FL 34746		CITY-ST-ZIP	Kissimmee FL 34746	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Penny Crowell</i>		DATE: <i>1/19/07</i>		DAYTIME PHONE: <i>407-847-4388</i>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					